/									Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2003									10749085					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OR	OTHER		
TOTAL CLAIMS			30					RATE FEE		FEE	]	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC F	EE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			30 minus 20=		· 10			X\$ 9=			OR	XS18=	18200	
INDEPENDENT CLAIMS			2 minus 3 =		· Ø			X43=			OR	X86≃		
		NDENT CLAIM P				<u> </u>		+145=			OR	+290=		
-11	the difference	in column 1 is	less than zero, enter *0* in column 2				İ	TOTAL		OR	TOTAL	450.00		
וע אן	/1/65 c	(Column 1)	MENDED - PART II (Column 2) (Column 3)					SMAL	L E	NTITY	OR	OTHER SMALL		
ENTA	·	CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT A	Total	. 28	Minus	<b>"</b> 3	0_	- /		XS 9=			OR	X\$18=		
	Independent	. 2	Minus	***	3	= /		. X43=	1	. /	OR	X86=	/	
	FIRST PRESE	NTATION OF M	JLTIPLE DE	PENDENT	CLAIM		<b>ا</b> ا	+145=			OR	+290=		
							L	TOTA			OR	TOTAL ADDIT, FEE		
(Column 1) (Column 2) (Column 3)														
AMENDMENT B	6/01/06	CLAIMS REMAINING 'AFTER AMENDMENT	angle	HIGHE NUME PREVIO PAID F	BER	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 24	Minus	ک د	30_	- /		X\$ 9=	1		OR	X\$18=		
	Independent	• 2 NTATION OF MIL	Minus	***	3	- <u>/</u>		X43=		/.	OR	X86=		
!	THOTFILOL	INTATION OF THE	CITY CE DE	CHOCH	O DAM	<del>-  -  :  </del>	1	+145=	1	7	OR	+290=		
						•	A	YOYA DDIT. FE			OR ,	TOTAL ADDIT. FEE		
		(Column 1)		(Colum		(Column 3)						•		
ENTC		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA	F	RATE		ADDI- IONAL FEE	I	RATE	ADDI- TIONAL FEE	
<b>∑</b> [	Total	•	Minus	**		<b>=</b>		X\$ 9=	T		OR	X\$18=		
S L	Independent	•	Minus	***			┟	X43=	t			X86=		
	FIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT	CLAIM		-		十		OR			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											OR	+290=		
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE  ADDIT. FEE										OR A	TOTAL DDIT. FEE			
		ber Previously Paic					r foun	d in the a	ppro	opriate box	in calu	mn 1.		